

CITY OF SAVANNAH – REVENUE DEPARTMENT

CLEARANCE CHECK FORM REAL PROPERTY, SPECIAL ASSESSMENTS

IMPORTANT NOTICE: The information entered on this form amounts which have been billed and recorded in Revenue Department files as of the date of this report. Other taxes, assessments and charges billed by the City and/or other operating departments or agencies of the City of Savannah may be incurred and billed on dates subsequent to the date of this report. Any such subsequent charges may attain lien status and in no way compromised by not appearing on this form.

REQUESTOR: Please complete items 1 thru 8, sign and submit to the Treasury Office for clearance check.

1. Property identification Number (PIN)_____ 2. Date_____
3. Legal description of property_____
4. Property address_____
5. Present owner/seller_____
6. New owner/buyer_____
7. Requested by (print or type)_____ 8. Phone No._____

By signing this form, I acknowledge that I understand the important Notice stated above.

Signature of requestor:_____

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TREASURY OFFICE: Checked by_____ Date:_____

Real Property Tax: Current 1st Installment () None Due () Due \$_____

Current 2nd Installment () None Due () Due \$_____

Delinquent () None Due () Due \$_____

Street Paving Assessments: Current () None Due () Due \$_____

Delinquent () None Due () Due\$_____

Delinquent Years_____

Other Assessments: Amount Due_____ Type_____

Current () Delinquent ()

*****All amounts given are good through_____*****